10/7/8,402

Parent and Trademain Office, U.S. DEPARTIMENT OF COMMERCE

	PATENT	APPLICATION Effective	DAD	197397402									
	CLAIMS AS FILED - PART 1 (Column 1) (Column 2)								NTITY	7 / QR	OTHER	THAN ENTITY	
Ľ	TOTAL CLAIMS] 3	30				PATE	FEE]	RATE	FEE		
Ŀ	OR		NUMBER FILED		NUMBER EXTRA		,	BASIC FEE	385.00	OR	BASIC FEE	770.00	
7	OTAL CHARGE	ABLE OLAIMS	90 minus 20=		•	0		X\$ 9=	90	OR	X\$18=		
IN	DEPENDENT C	LAIMS	ninus 3 a		•			X43=	 ' 	-	X86=	 	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR		 	
•	* If the difference in column 1 is less than zero, enter "0" in column 2									OR	1290c		
								TOTAL	475	OR	TOTAL	L	
_	CLAIMS AS AMENDED - PART II (Cotumn 1) (Cotumn 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BEA WSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ş	Total	. 33	Minus	- 3	0	. 3		XS 9=	29	OR	X\$18=		
AME	independers	. 2	Minus		<u>\$</u>	·		X43=	_	OR	X86=		
_	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		<u> </u>	+145=					
										OR	+290=		
	(Column 1) (Column 2) (Column 3)								27	OR	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING	T	HICHE	51	(Cotumn 3)	lr	fee o	ADDI-	1		4001	
		AFTER AMENCHENT		NUMB PREVIO PAID P	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL FEE	
	T- 423	. 30	Wiints	- 3	3			XS 9=		OR	X\$18=		
	Independent	· 2	Minus	<u>ت</u> غ				X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-145=		OR	+290=		
7	11/1/	٠ .					<u>د</u>	1413.		OR	TOTAL	•	
8	\ 	(Column 1)		(Colum	n 2)	(Column 3)	-;				ADDIT FEE		
MENT C	,	CLAIMS . REMAINING AFTER AINE! JOMENT		HIGHE NUMB PREVIOU PAID F	er Jsly	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
9	Total	. 28	Miras	-33		. /	Γ	AS SE		OR	X\$18e	-FEE	
AMENDA	Independent	/ 1	Minus	~ 3		z /	H			<u>س</u> ا			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	X43=		OR	X86=		
. 4	the entry in colum	L	145=		OR	+290=	<u> </u>						
~;	If the entry in column 1 is less than the entry in column 2, write "0" in column 3 "If the Highest Number Previously Paid For" IN THIS SPACE is loss than 20, enter "20." "If the Highest Number Previously Paid For" th THIS SPACE is less than 20, enter "3." The Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
_	710475 FREV 1040						mem				nar I.		